POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	S.B	*(handwritten)*	*(handwritten)*
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	iA	49416	11/2/0
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔	.... Rejected		N	.... Non-elected
=	.... Allowed		I	.... Interference
–	(Through numeral)... Canceled		A	.... Appeal
÷	.... Restricted		O	.... Objected

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)